



07-11-06

SR 3626 \$

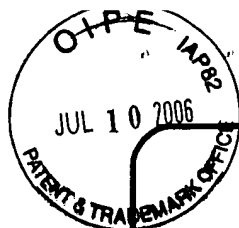
Mail Stop Amendment TRANSMITTAL FORM <i>(To be used for all correspondence after initial filing)</i>		Application Number	10/016,506
		Filing Date	December 10, 2001
		Confirmation Number	9080
		Inventor(s)	PAWLIKOWSKI et al.
		Group Art Unit	3626
Express Mail Label No.: EV 196253151 US		Examiner	Koppikar, V.
Total Number of Pages in This Submission:	25	Attorney Docket No.	00-22

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <i>(submit in duplicate)</i>	<input type="checkbox"/> Assignment Papers	<input type="checkbox"/> Issue fee Transmittal Form PTOL-85(b) + (c) and Cover Sheet
<input type="checkbox"/> Fee Attached \$ <input type="text"/>	<input type="checkbox"/> Cover Sheet	<input type="checkbox"/> After Allowance Communication to Group
Check No.: <input type="text"/>	<input type="checkbox"/> Drawing Change Authorization Request and Amended Figure(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Response	<input type="checkbox"/> Request for Return of PTO-1449 Forms	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to the Commissioner	<input type="checkbox"/> Request for Continued Examination (RCE)
<input type="checkbox"/> Affidavits / Declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Request Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Address	<input type="checkbox"/> Small Entity Statement
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer(s)	<input type="checkbox"/> Request for Refund
<input type="checkbox"/> Form PTO-1449	<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Response to Missing Parts / Incomplete Application
<input type="checkbox"/> Cited References	<input checked="" type="checkbox"/> Certificate of Mailing by Express Mail	
<input type="checkbox"/> Search report		
<input type="checkbox"/> Drawing(s): Number of Pages <input type="text"/>	<input type="checkbox"/> Other Enclosure(s): <input type="text"/>	
Number of Figs. <input type="text"/> and cover sheet		
<input type="checkbox"/> Formal		
<input type="checkbox"/> Informal		

Current Due Date: July 21, 2006 (one month extended)

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Individual and Company	Michael W. Haas, Reg. No. 35,174 RESPIRONICS, Inc., 1010 Murry Ridge Lane, Murrysville PA, 15668
Signature	<i>Michael W. Haas</i>
Date	July 10, 2006

CERTIFICATE OF MAILING	
I hereby certify that this correspondence and all enclosures are being deposited with the United States Postal Service with sufficient postage as "Express Mail Post Office to Addressee" in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date: <u>July 10, 2006</u> , Express Mail Label No. <u>EV 196253151 US</u> .	
Typed Name	Michael W. Haas, Reg. No. 35,174
Signature	<i>Michael W. Haas</i>
Date	July 10, 2006

**FEE TRANSMITTAL**

(Effective 12/08/2004)

"Express Mail" Label No. EV 196253151 US

TOTAL AMOUNT OF PAYMENT \$ 120.00

Application Number	10/016,506
Filing Date	December 10, 2001
First Named Inventor	PAWLIKOWSKI et al.
Confirmation Number	9080
Group Art Unit	3626
Examiner's Name	Kappikar, V.
Attorney Docket No.	00-22

METHOD OF PAYMENT					FEE CALCULATION (continued)					
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: Deposit Account Number <u>50-0558</u> Deposit Account Name <u>Respironics, Inc.</u> <input checked="" type="checkbox"/> Charge any additional fee required under 37 C.F.R. §§ 1.16, 1.17 and 1.20 <input type="checkbox"/> Charge the Issue Fee set forth in 37 C.F.R. § 1.18					3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 for each additional 50 sheets or fraction thereof. See 35 U.S. C. § 41(a)(1)(G) and 37 C.F.R. § 1.16(s). Total Sheets _____ Extra Sheets _____ Number of each additional 50 fraction thereof _____ Fee(\$) _____ Fee Paid(\$) _____ _____ -100 = _____ /50 = _____ (round up to a whole number) X 250 = <u>0.00</u>					
2. <input type="checkbox"/> Payment Enclosed: Check (Check No. _____)					4. ADDITIONAL FEES					
FEE CALCULATION (fees effective 12/08/2004)										
1. BASIC FILING, SEARCH, AND EXAM FEES (Large Entity Only)										
Appl. Type	Filing Fee(\$)	Search Fee(\$)	Exam Fee(\$)	Fees Paid	Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
Utility	300	500	200		1051	130	2051	65	Surcharge - late filing fee or declaration	
Design	200	100	130		1811	100	1811	100	Certificate of Correction	
Plant	200	300	160		1812	2,520	1812	2,520	For filing a request for reexamination	
Reissue	300	500	600		576	25	576	25	Additional filing receipt, duplicate or corrected due to applicant error	
Provisional	200	0	0		1251	120	2251	60	Extension for response within first month	120.00
					1252	450	2252	225	Extension for response within second month	
					1253	1,020	2253	510	Extension for response within third month	
					1254	1,590	2254	795	Extension for response within fourth month	
					1255	2,160	2255	1,080	Extension for response within fifth month	
					1401	500	2401	250	Notice of Appeal	
					1402	500	2402	250	Filing a brief in support of an appeal	
					1403	1,000	2403	500	Request for oral hearing	
					1452	500	2452	250	Petition to revive unavoidably abandoned application	
					1453	1,500	2453	750	Petition to revive unintentionally abandoned application	
					1501	1,400	2501	700	Utility issue fee (or reissue)	
					1502	800	2502	400	Design issue fee	
					1814	130	2814	65	Statutory Disclaimer	
					1460	130	1460	130	Petitions to the Director	
					1807	50	1807	50	Petitions related to provisional applications	
					1806	180	1806	180	Submission of Information Disclosure Stmt	
					8021	40	8021	40	Recording each patent assignment per property (times number of property)	
					1801	790	2801	395	Request for Continued Examination	
					1504	300	1504	300	Publication Fee	
					Other Fee (specify) _____					
2. CLAIMS										
Total Claims _____ Extra Claims _____ Fee from Below _____ Fee Paid _____										
Ind. Claims _____ Extra Claims _____ Fee from Below _____ Fee Paid _____										
Multiple Dependent Claims add _____ 360 = _____										
* Enter Highest Number Previous Paid For _____										
Large Entity Fee (\$)	Small Entity Fee (\$)	Fee Description								
1202 50	2202 25	Claims in excess of 20								
1201 200	2201 100	Independent claims in excess of 3								
1203 360	2203 180	Multiple dependent claim								
1204 200	2204 100	Reissue independent claims over original patent								
1205 50	2205 25	Reissue claims in excess of 20 and over original patent								
SUBTOTAL (1) \$ 0.00					SUBTOTAL (2) \$ 0.00					
					SUBTOTAL (3) \$ 120.00					

SUBMITTED BY					
Typed or Printed Name	Michael W. Haas			Reg. Number	35,174
Signature		Date	July 10, 2006	Deposit Account Number	50-0558



Certificate of Mailing by "Express Mail"

EV 196253151 US

"Express Mail" label number

July 10, 2006

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